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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/594,048			ing Date 20/2007	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN
FOR			NUMBER FI	LED NU	MBER EXTRA	Г	RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A	1	N/A		1	N/A	
SEARCH FEE (37 CFR 1 16(k), (i), or (m))			N/A		N/A]	N/A]	N/A	
EXAMINATION FEE (37 CFR 1 16(o), (p), or (q))			N/A		N/A		N/A]	N/A	
TOTAL CLAIMS (37 CFR 1 16(i))			minus 20 =]	x \$ =		OR	x s =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =			l	X \$ =		1	X 8 =	
If the specification and drawings exceed 100 better of pager, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						J			ı		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		J	TOTAL	
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3) CLANUS HIGHEST							SMAL	L ENTITY	OR		ER THAN ALL ENTITY
AMENDMENT	03/04/2011	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	· 26	Minus	** 26	= 0	ı	x s =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 3	Minus	3	- 0	1	X \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(Column 1)		(Column 2)	(Column 3)						
ENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,15())		Minus		-		X \$ =		OR	x s =	
M	Independent (37 CFR 1 16(h))	*	Minus	***	-		X \$ =		OR	X 8 =	
H.	Application S	ize Fee (37 CFR	1.16(s))]			1		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
									OR	TOTAL ADD'L FEE	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Iotal or independent) is the highest number found in the appropriate box in column 1. The "Highest Number Previously Paid For" (Iotal or independent) is the highest number found in the appropriate box in column 1. This collection of Information is required by 37 CFR 1.16 information is equivalent or tretain a brentit by the public which is to file (and by the USPTO to											

into consciond information is required by 3 of Let 1. 16. The findmand in sequence of contain of retain a content of the light of the process) an application. Confidentially is governed by 3 of U.S. C.12 and 37 (2014) 11.4. This condition is estimated to take 12 minutes to one injective including gathering, preparing, and submitting the completed application form to the USPTO. Time will way depending upon the individual case. Any comments on the amount of time you require to complete this form and ors suggestions for reducing this burdon, should be sent to the Cell elithornation of Disc. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, V.A. 2231-0. D.N. OT 1550, Alexandria, V.A. 2231-1450.

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